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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
04 JUL 19 PM 1:41

TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: JOE GARCIA & ASSOCIATES, INC  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00  
Filing Fee

\$78.75  
Filing Fee  
& Certificate of Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: JOE GARCIA  
Name (Printed or typed)  
8408 E. COLONIAL DR.  
Address  
ORLANDO, FL 32817  
City, State & Zip  
407-694-0055  
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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**ARTICLE I NAME**

The name of the corporation shall be:

*Joe Garcia & Associates, Inc.*

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

*8408 E. COLONIAL DRIVE  
Orlando, FL 32817*

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

*To have and exercise all the powers conferred by laws of the state of Florida upon corporations for profit. To offer consulting services to individuals and small business.*

**ARTICLE IV SHARES**

The number of shares of stock is:

*100*

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

*JOE GARCIA, PRESIDENT      MANUEL F. ISLA, Vice President, Sec. Treasure  
8408 E. COLONIAL DR.      8408 E. COLONIAL DR.  
Orlando, FL 32817      Orlando, FL 32817*

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

*MANUEL F. ISLA  
8408 E. COLONIAL DR.  
ORLANDO, FL 32817*

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

*MANUEL F. ISLA  
8408 E. COLONIAL DR.  
ORLANDO, FL 32817*

\*\*\*\*\*

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity:

*Manuel F. Isla*  
\_\_\_\_\_  
Signature/Registered Agent

*7-14-04*  
\_\_\_\_\_  
Date

*Manuel F. Isla*  
\_\_\_\_\_  
Signature/Incorporator

*7-14-04*  
\_\_\_\_\_  
Date